

RESOURCES FOR ADDRESSING HEARING DIFFERENCES IN ADULTHOOD

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LEARNING OBJECTIVES

- Participants will identify key issues to consider when serving adults with hearing differences.
- Participants will learn local, state, and national resources for serving individuals and families.
- Participants will have the opportunity to network so as to increase the collaboration between providers across the state.



EFFECTIVE CASE MANAGEMENT WITH INDIVIDUALS WHO ARE DEAF OR HARD OF HEARING

- Sets a solid communication foundation respecting the rights and needs of the individual with hearing loss
- Empowers the individual with education
- Respects the decisions made
- Encourages self-advocacy
- Recognizes societal barriers and works to reduce them
- Involves self awareness on the part of the case manager or service coordinator regarding his or her biases, privileges, and power differentials
- Happens from a strengths-based perspective

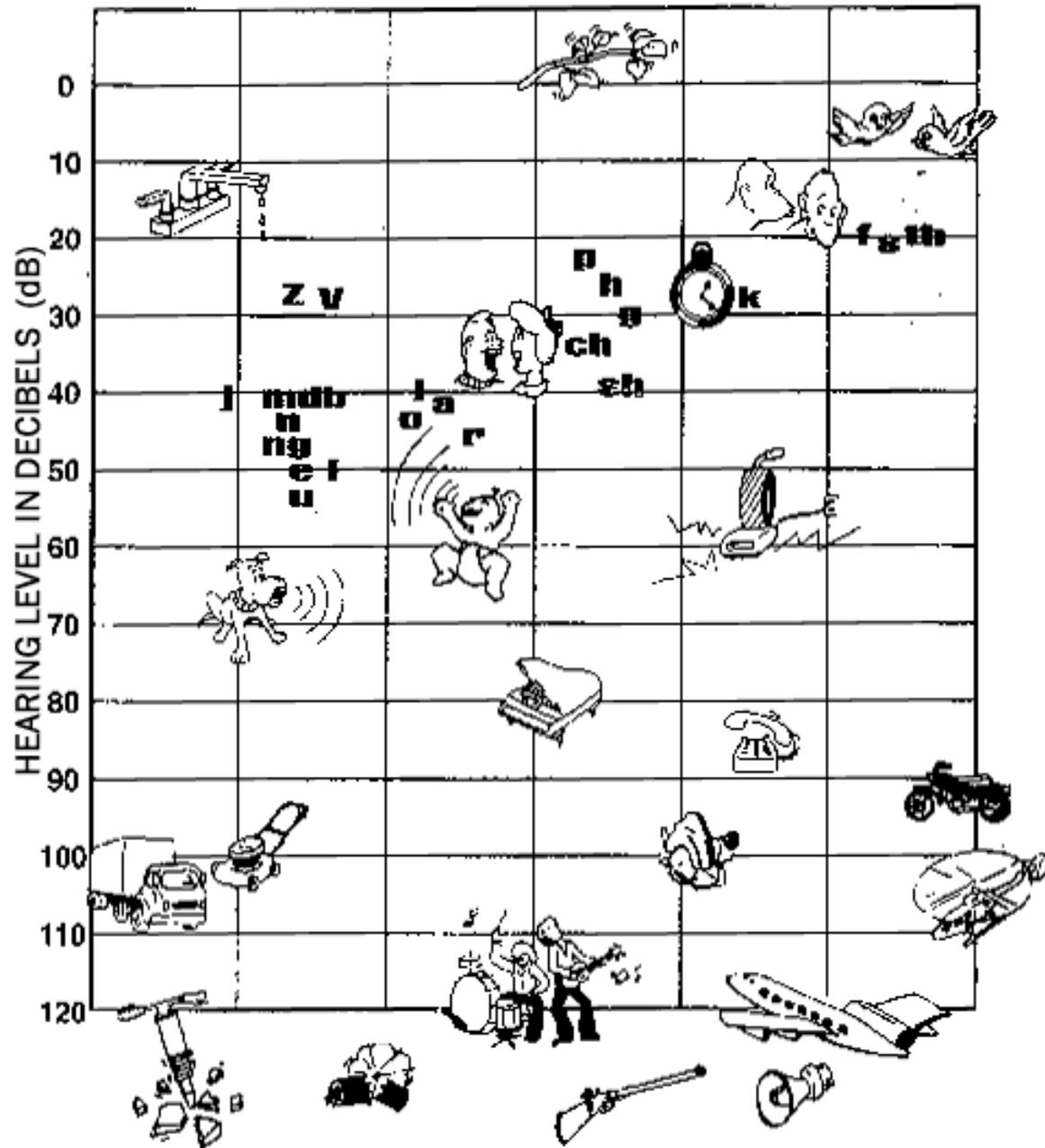


HOW IMPORTANT IS HEARING...REALLY?

- Experiential Activity with Levels of Hearing Loss
- How could different levels of hearing loss affect your work in a community setting?
- How could the worldview of a person with hearing loss be different or similar?
- How may the needs of individuals who are deaf be similar to and different from those who are hard of hearing?

FREQUENCY IN CYCLES PER SECOND (HZ)

125 250 500 1000 2000 4000 8000



Referral Options

- Commission for Children with Special Health Care Needs (CCSHN)
 - <http://chfs.ky.gov/ccshcn/>
- Heuser Hearing Institute
 - <http://thehearinginstitute.org/>
- University of Louisville Audiology
 - <http://louisville.edu/medschool/audiology/clinical-services.html>
- Veterans Administration
 - <http://www.va.gov/>
- KY Academy of Audiology
 - <http://kyaudiology.org/>
- KY Speech Language Hearing Association
 - <http://www.ksha.info/>

Tips for Case Management

- Age of Hearing Loss can impact a person's preferred mode of communication
- Individuals with congenital hearing loss often have a different perspective and path than those with later hearing loss
- If a person has multiple medical problems, addressing hearing loss may be set at a lower priority, but it WILL affect how all info is received and processed
- Individuals and families are rarely presented with a range of choices or options; seeking objective advise and multiple opinions can be a vital role for the case manager
- Adults facing hearing loss may wait 5-7 years before getting help!

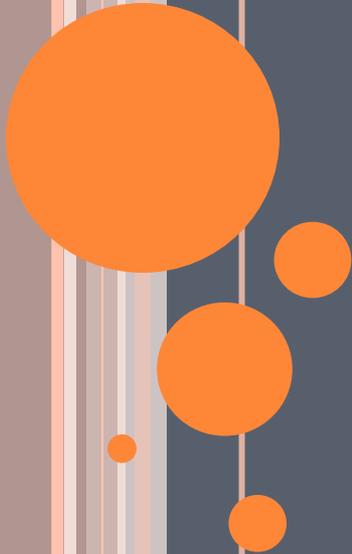
RESOURCES RELATED TO AUDIOLOGY AND
MEDICAL NEEDS



REMEMBER!



**MOST PEOPLE ARE
NOT
SEEKING TREATMENT FOR
HEARING LOSS
BUT
HEARING LOSS MUST BE
CONSIDERED IN TREATMENT
PLANNING**



Resources

- “Additional Questions to Address in Evaluation for Deaf or Hard of Hearing Clients”
- “Rationale for Additional Assessment Questions”
- “Helpful Hints for Hearing Screening” PowerPoint



Tips for Case Managers

- Explain the roles of all involved in the team
- Make sure that consumers are fully included in the process
- Break down the process into multiple sessions if needed
- Do not allow the individual to sign the plan if you don't think s/he understands it
- Remember that a person cannot look at an interpreter and paperwork at the same time!
- Avoid multi-tasking
- Consider the English language literacy level of the person; English may be a second language for him / her
- What is truly informed consent?

CONSIDERING THE NEEDS OF PERSONS WHO ARE HIGHLY VISUALLY ORIENTED



- Need for Context
- Importance of Body Language and Facial Expressions
- Eye Contact
- Direct Communication (vs. Incidental Learning)
- Safety Concerns
- Must meet **their** communication needs
- Behavior as communication
- Anything provided orally to a hearing patient must be provided **visually** to a Deaf or Hard of Hearing patient



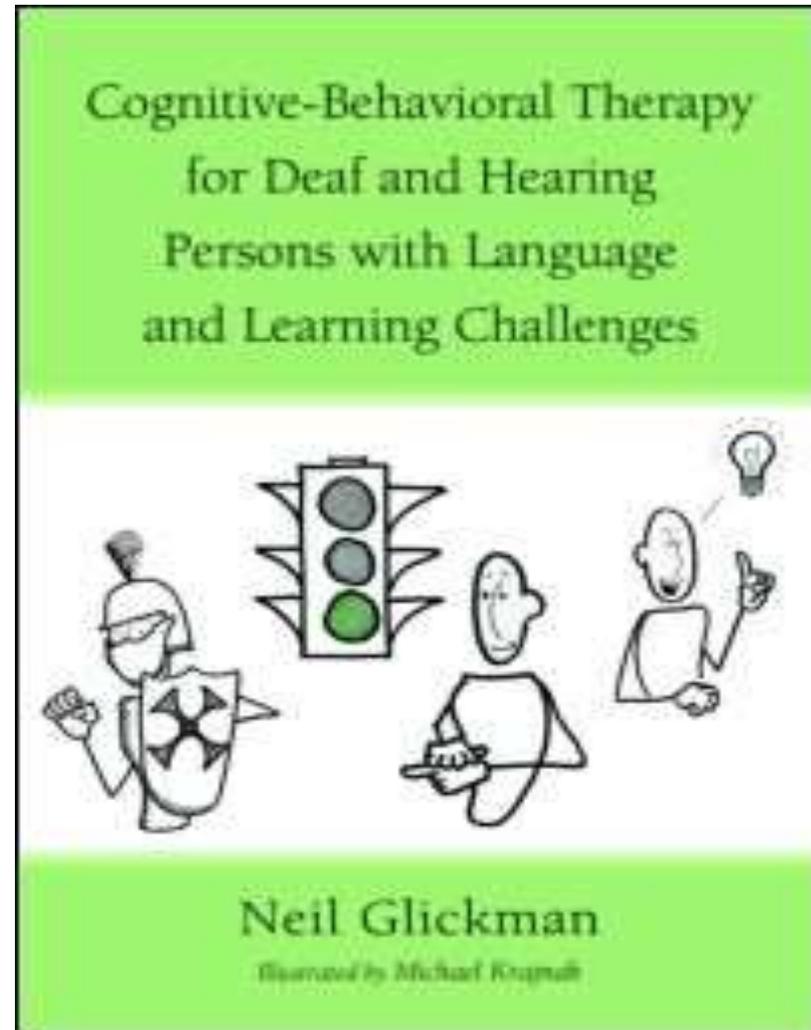
MEETING INDIVIDUALIZED COMMUNICATION NEEDS: POSSIBLE MODES OF COMMUNICATION

English/ Oral	Signed Exact English	Pidgin Signed English	ASL
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A NOTE ON DYSFLUENCY

- Deaf individuals may have language deficits due to late and inadequate exposure to American Sign Language
- Other factors may include organicity related to etiology, developmental disability, or, possibly, mental illness
- Must differentiate between dysfluency related to thought disorder and dysfluency related to **language deprivation**
- Individuals isolated from Deaf peers may also display “odd” signing or non-traditional sign symptoms



**How would that affect your thinking? Feeling?
Perception of the world? Understanding of Cause
and Effect?**

WHAT IF YOU HAD NO EARLY LANGUAGE EXPOSURE?

- ...and had a mental illness?
- ...or substance abuse issue?
-or developmental or intellectual disability?

Resources

- KY Commission on the Deaf and Hard of Hearing
 - Resource Library, Events Page, etc.
 - <http://www.kcdhh.ky.gov>
- For Hearing People Only by Moore & Levitan
- Through Deaf Eyes by PBS
- Jacobs Hall Museum on the KY School for the Deaf campus
- www.aslinfo.com

Tips for Case Managers

- Be aware of power differentials and hearing privilege (as well as Deaf privilege)
- Not all consumers who are Deaf or Hard of Hearing will self identify with Deaf culture
- Your attitude, openness, and willingness to learn will be key to engagement and building trust
- The best way to learn about a culture is to interact with *multiple* people from that culture and to do self-study

RESOURCES FOR LEARNING ABOUT DEAF CULTURE



BASICS OF TEAMING WITH A SIGN LANGUAGE INTERPRETER



- Have the consumer set up the room as s/he desires
- Generally, the interpreter sits next to and slightly behind the speaker in a 1:1 situation
- Interpreting is generally simultaneous; Interpreters will make different choices to make sure the message is clear
- Go at your regular pace; the interpreter will stop you if necessary
- Avoid use of technical jargon and acronyms
- Provide copies of agenda and written materials before beginning if possible
- **Everything** said in the room will be interpreted



WORKING WITH AN INTERPRETER (CONTINUED)

- Conduct a **pre- and post-session** with the interpreter to inform and debrief
- Scheduling interpreters at least a week before meetings is desired
- Use the same interpreter(s) throughout treatment for consistency
- Consider the interpreter the language and culture expert on your team
- Maintain eye contact with the consumer and speak directly to him/her
- In Kentucky, law requires that paid interpreters be **licensed and certified**
- Use family members only with extreme caution and only adjunctive to professional interpreters
- Consider the possibility of vision issues – be aware of lighting, clothing, placement of signs, etc.
- Some services can be reimbursed through the Department



SOMETIMES AN INTERPRETER ISN'T ENOUGH!

Name: _____

Counselor: _____

Date: _____

1. My work in counseling



Great (worked hard)



Fair (worked some)



Lousy (Bad attitude)

2. My counselor helped me:



Helped a lot



Helped some



No help

- The presence of an interpreter does NOT guarantee that everyone is on equal ground or has shared understanding
- Use of Deaf Interpreters / Certified Deaf Interpreters
- Necessity of Visuals
- Conveying Key Concepts through gesture, drawing, role play, etc.
- “Talk” Therapy not always effective

QUALIFIED INTERPRETERS PROVIDE ENTRY INTO SERVICES....

This Does Not Always Translate into EQUAL ACCESS to services

YOU, as the service coordinator, case manager, and advocate, have an obligation to ensure that the Deaf individual is receiving effective treatment!

Some of your most important work will likely be advocating for language access.

Resources and Referral Options

- “Guidelines for Working with and ASL Interpreter in a Mental Health Setting”
- KCDHH Access Center
 - <http://www.kcdhh.ky.gov/oea/referral.html>
- KY Board of Interpreters Directory of Licensed Interpreters
 - www.kbi.ky.gov

Tips for Case Managers

- There are pros and cons to using an interpreter referral agency involving convenience, cost, match, and quality
- Work pro-actively with your supervisor to plan for the need
- Know your agency’s policies and guidelines
- Get to know interpreters and develop professional rapport
- Be flexible in scheduling, especially depending on your location

RESOURCES FOR OBTAINING AN INTERPRETER

Resources

- “124 -Enhanced Access Interpreter Reimbursement for CMHC’s”
- Interpreter Payment for AA Meetings
- “DOJ Tax Incentives for Businesses”
- KY ADA Coordinator

Tips for Case Managers

- Any agency receiving federal funding is under obligation by the ADA to provide “reasonable accommodations”
- The amendments to the ADA and the KY Civil Rights Act provide further mandates
- Working WITH a provider is generally more fruitful than threatening ADA
- A person who signs is NOT the same as an interpreter!
- Try to keep one role at a time – a case manager should not also be the interpreter for a consumer
- You can set the tone for the language access provided to a consumer in a specific setting, in your agency, and in the community
- Be the “change agent” you want to see in your sphere of influence!

RESOURCES FOR PAYING FOR AN INTERPRETER
/ ADDRESSING COST



Resources

- Certified Deaf Interpreters
 - “CDI Talking Points”
 - “Sample List of Concepts, Questions, etc. that can be difficult to interpret in mental health settings”
- Helen Keller National Center
 - www.hknc.org
- KY Association for the Deaf-Blind
 - Annual Deaf-Blind Retreat
 - <http://www.independenceplaceky.org/KADB.shtml>
- Personal Futures Planning (PFP) through OVR
 - <http://ovr.ky.gov/programservices/dhhs/>
 - Deaf at Risk Specialists
 - Shared Cases with Office for the Blind
 - Deaf-Blind Specialists

Tips for Case Managers

- Individuals who are Deaf or Hard of Hearing and have additional challenges may be referred to as “Low Functioning Deaf,” “Psychologically Unsophisticated,” or having “Minimal Language Skills.” In KY, we use “Deaf at Risk.”
- Casefinding often happens where individuals have been hidden for years and may present as having a developmental or intellectual disability due to educational and linguistic deprivation. In these situations, establishing a team is vital to address the layer of needs

RESOURCES FOR DEVELOPMENTAL OR
INTELLECTUAL DISABILITIES AND INDIVIDUALS
WHO ARE DEAF-BLIND



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KEEP IN TOUCH!

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